

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	maria		03-28-91
O.I.P.E. CLASSIFIER		8	04/23/01
FORMALITY REVIEW	spa	85 2	05-21-01
RESPONSE FORMALITY REVIEW	SIA	SC1039	03-11-02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
1	Final 1/22/02
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	0
15	6
16	0
17	0
18	0
19	0
20	0
21	0
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	0
33	✓
34	=
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
51	✓
52	0
53	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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